Application of Docket Number														
PATENT APPLICATION FEE DETERMINATION RECORD /0//											12	128608		
Effective October 1, 2003											0	7286	OB-	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			٠
TOTAL CLAIMS			12					RAT	Έ	FEE		RATE	FEE	•
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			1:7- minus 20=		.0			XS	9=		OR	XS18=		
INDEPENDENT CLAIMS			7 _minus 3 =		10			X4:	 }=		OR	X86=		
		DENT CLAIM PR						+14	E _		OR	+290=		
* If the difference in column 1 is less than zero, ente						olumn 2	•	TOT			OR	TOTAL	120,	2
								101	AL.	L		OTHER		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMA	LL	ENTITY	OR	SMALL I		
4		CLAIMS REMAINING		HIGH NUM	HEST IBER OUSLY	PRESENT EXTRA		RA <sup>*</sup>	Έ	ADDI- TIONAL		RATE	ADDI- TIONAL	
ENT		AFTER AMENDMENT		PAID	FOR	LAITE	4.			FEE			S42	
AMENDMENT	Total	. 39	Minus	- 2	0	= /9		X\$	9=		OR	X\$18=	J42	-
ME	Independent	• 5	Minus	***	3	1 4	-	X4:	}=		OR	X86=	172	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+14	5=		OR	+290=	ļ	
									TAL		OR	TOTAL	514	p
	(Column 1) (Column 2) (Column 3)								FEE		٠٠٠ :	ADDIT. FEE		1
		(Column 1)		HIG	HEST	(Column 3	ጎ			ADDI-	1		ADDI-	1
NT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY DFOR	PRESENT		RA	re .	TIONAL FEE		RATE	TIONAL FEE	1
Na Na Na Na Na Na Na Na Na Na Na Na Na N	Total		Minus	**		=		×\$	9=		OR	X\$18=		1
AMENDMENT	Independent	*	Minus	***	<u>-</u>	<u> -</u>	4	X4	3=		OR	X86=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT (						لـ	+14	5=		OR	+290=		
1		ï						<u> </u>	OTAL		OR	TOTAL		1
٠.						ADDIT	FEE		J ~	ADDIT. FEI	=	1		
<u> </u>		(Column 1)	<del></del>		umn 2) HEST	(Column 3	<u>"</u>			LADDI	7		ADDI-	-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER /IOUSLY D FOR	PRESENT EXTRA		RA	TE	ADDI- TIONAL FEE		RATE	TIONAL	
DME	Total	*	Minus	**		=	7	X\$	9=		OF	X\$18=		
	Independent	*	Minus	***	· · · · · · · · · · · · · · · · · · ·	=		X4	3=		OF	X86=		1
₹	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDE	NT CLAIN						10	`	<del> </del>	1
								L	15=		OF			4
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **ODIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OF	ADDIT. FE		4
"		umber Previously I mber Previously P						ound in	the a	ppropriate b	ox in (	column 1.		